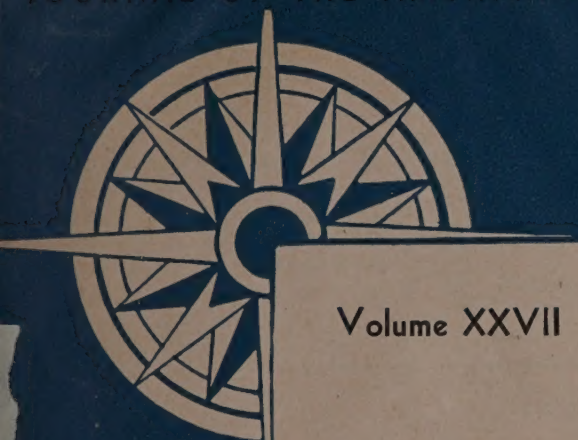


THE COMPASS

JOURNAL OF THE AMERICAN ASSOCIATION OF SOCIAL WORKERS



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Number 1

LEGISLATION FOR YOUTH

HEALTH SECURITY

HOUSING PROPOSALS

FULL EMPLOYMENT

MILITARY EXPERIENCE

SCHOOL OF SOCIAL WORK
University of Illinois
Navy Pier, CHICAGO

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A Legislative Program for Youth

BY ROBERT C. TABER

Director, Division of Pupil Personnel and Counseling, Board of Public Education, Philadelphia, Pa.

THE signs of trouble ahead for youth are unmistakably clear. Only a broad legislative program will prevent a post-war upheaval of boys and girls which might well overshadow the wartime rise in juvenile delinquency.

It isn't a case of guessing or being a "calamity howler." From past experience, we know that the incidence of unemployment among minors in 1939 was nearly three times that of adult workers. With the prospect of from six to eight million being jobless this coming winter this disproportionate share of unemployment among youth will now be accentuated by three factors:

1. Priority for jobs during the reconversion period is being given to veterans, to more mature and experienced workers, and to heads of families.

2. The usual educational and age requirements temporarily suspended during the critical manpower shortage are already being resumed.

3. The million and a half youths who dropped out of school for employment during the war years will be handicapped in the stiff competition for jobs.

We have been quick to foresee the hurdles which will confront the returning veteran. The Selective Service Act guarantees the veteran the job held at the time of induction. The G. I. Bill provides broad educational opportunities and financial loans to aid in his adjustment. But what about teen-agers, the course of whose lives has been changed by the war? No such comprehensive and constructive plan has been proposed to assist them in the transition from a war to a peacetime economy.

WILL YOUTH RETURN TO SCHOOL?

Management and labor, motivated by the desire to reduce the excess labor supply, have joined hands in urging youth to return to school. The plan is logical but not so easily carried on. In

the first place, boys and girls who have been living in an adult world for several months or perhaps years are not interested in returning to the "usual" school program with younger pupils. They desire either vocational retraining or an academic program geared to their specific needs.

Most schools could readily mobilize their resources to provide such a flexible program but their budgets are already heavily pressed with the responsibility for in-school youth. Special retraining and individual adaptation is costly.

In the second place, many youths will not be able to resume their studies without financial assistance. Under the present interpretation of the law, those eligible for unemployment compensation cannot draw their benefits if they return to school as they would no longer be considered "available for work," a prerequisite for eligibility under most state laws. It would be utter folly to expect youths in large num-

bers to forego unemployment benefits to return to school.

Thirdly, a great many youths have entered occupations for which they are not suited, or occupations in which job opportunities will greatly decline in a peacetime economy. They will find themselves at a "dead-end" unless individual counseling, vocational guidance and testing facilities are available to guide them in selecting a suitable vocation or trade. With the discontinuance of Federal funds for war production training, these testing and guidance activities which were a part of the program have, in many instances, also been discontinued.

WHAT SOURCES ARE NEEDED

Provision of a worthwhile educational program which would enlist and sustain the interest of out-of-school youth is but a part of the challenge. If history should repeat itself, high school graduates will again be confronted with the prospects of prolonged unemployment. We have seen how

Robert Taber is chairman of the AASW Committee on Organization and Planning of the Social Services in the War and Postwar Periods. A subcommittee working in the area of services to youth was located in Chicago, and prepared material for use in AASW platform statements and as a basis for the program of action now being planned. Members of the committee are Lucy Carner, chairman, Louis de Boer, William F. Byron, Harrison Dobbs, Glenford Lawrence, Mrs. Alma Livermore.

devastating such an experience can be—how it gives rise to restiveness and cynicism, if not delinquency. In a period of widespread unemployment, a dignified and worthwhile paid-work program will be urgently needed to bridge the gap between school and job.

The matter of a job placement service will also assume larger proportions as a result of the war. The United States Employment Service or the state services, whichever may result from the current legislation, will be heavily pressed by war workers and veterans in search of jobs in a peacetime economy, and by applicants for unemployment compensation. They are not likely to have the staff time to provide individual counseling to minors who need special help in the transition from school to job when so many boys and girls shift from one job to another, and all too frequently founder in confusion. Any program organized for youth should make special provision for a junior placement service, possibly a joint project of the schools and the United States Employment Service.

In addition to the boys and girls who dropped out of school, there are another five million who have worked part-time after school and during vacations. They, too, have experienced a psychological as well as a financial independence and will be seeking other outlets when part-time jobs are sharply curtailed. They have had the money to pursue their recreational interests, money which neither they nor their parents may have if unemployment becomes widespread. In most communities, there has been a paucity of recreational opportunities for youth. The outcropping of teen-age canteens over the entire country has met with a vigorous response. If these programs were needed during the war, the need will be even greater in the future when so many boys and girls will be at loose ends. An extensive leisure time program would serve as a stabilizing factor for in- and out-of-school youth.

Another acute problem will arise if the compulsory school age is raised to eighteen years. Rumblings in this direction are already being heard. One of the school's most vulnerable points has been its failure to round out the educational experience of the child who is not academically minded and who, in former years, was an early school leaver. The mere extension of the compulsory school age does not mean that the child's education has thus been extended. On the contrary, compulsory attendance frequently leads to difficulty because traditional courses so seldom meet the needs of such pupils. Only part of the blame can be laid at the door-step of the schools because the flexible and activity-centered program required for these pupils is costly. Furthermore, these youths are impatient to engage in activities beyond the confines of the school and which simu-

late working conditions. During the 30's the CCC Camps and the N.Y.A. hostels partially filled this need. If full employment is not achieved in the immediate future, residential work centers with further emphasis on training should become an integrated part of our educational and welfare programs.

The war has altered the course of the lives of millions of civilian youth, and its aftermath will color the lives of millions more. It is too much to hope that we can turn back the clock and expect boys and girls to resume their former patterns. Many of them have been catapulted into adulthood and will now experience pressure to postpone the privileges as well as the responsibilities of adult living. Such a turning of the tables is bound to meet with resistance accompanied by confusion and turmoil.

A CONSTRUCTIVE PROGRAM PROPOSED

A broad and constructive program for youth is urgently needed to take up the slack. Among the more important aspects of such a legislative program for which federal funds will be required are

1. Opportunities for vocational retraining
2. Scholarship aid
3. Expansion of school counseling services and testing facilities
4. Establishment of a specialized job placement service for minors
5. A remunerative work-training program for high school and post high school students
6. Extensive recreational activities
7. Work-training residential centers

Recognizing this need, the American Association of Social Workers has taken the initiative in calling together representatives of the American Association for the Study of Group Work and the Associated Youth Serving Organizations. They will consider specific proposals which should be incorporated in a federal bill.

As social workers, we know the signs of trouble ahead. We also know the hue and cry which will be raised by the press and the public if maladjustment and delinquency become rampant. The problem cuts across education and social work in such a way that our responsibilities are inextricably intertwined. In the face of increasing pressure to reduce federal expenditures, it becomes our joint responsibility to interpret the needs of youth, to formulate a sound program, and to press for adequate legislation and funds. Failing in this, millions of boys and girls will needlessly be added to the already formidable list of war casualties.

A Prescription for Health Security

BY MARTHA MENDELL, M.D.

FIGURES are remarkable things. Statisticians can tell us how many days of illness occurred in 1944 and how many man-hours of work were lost on that account. They can tell us how much the life expectancy has risen in the last fifty years and some of the reasons why. They can tell us how much more rheumatic fever and tuberculosis occurs among the poor than among the well-to-do. Louis I. Dublin of the Metropolitan Insurance Company in his book "Health and Wealth" has even computed the capital value of a boy at birth as \$9,000.00 and that of a girl as \$4,000.00.

Figures, figures. They are put to all sorts of uses; by the scientist to prove his complicated theory and by the scoundrel to prove that what was good enough for grandpa should be good enough for you. But one real nice thing about figures, especially health figures, is that we can improve them if we will. We have done so in the past and we have certainly not reached the limit of possible improvement. We can lower the death rate still further; we can lower the morbidity rate; yes, we can increase the life expectancy of the people.

Many factors have entered into the improvement of health statistics; one of them undoubtedly is the stupendous increase in medical knowledge during the past fifty years. The medical profession would be the first to admit this, but unfortunately many doctors still do not realize that it is the individual patient's inability to purchase the best skill of the medical profession which is responsible for some of the unpleasant statistics which face us today.

For instance. In 1943, 160,000 rural mothers were delivered in their homes without any doctor in attendance at all. In Connecticut the infant death rate was 30, but in New Mexico the rate was 91.6. There must be some reason, aside from the difference in climate to account for such dis-

parity, and one of the factors is availability of adequate medical care at a price which the patient can pay.

The same holds true for maternal death rates. In 1943, Minnesota had a maternal death rate of 14.4 but the state of New Mexico had a maternal death rate of 46.7.

It has been calculated that if the worst of these figures could have matched the best, we could have saved over 31,000 infants and nearly 3,000 mothers in that one year. On the basis of the capital value of infants cited above, that adds up to a tidy sum of money, something like \$150,000,000 for the lost infants. I do not know what the estimated capital value of a mother is supposed to be, so I cannot give you the capital loss, but I do know that if we had locked those 3,000 mothers in a freight car and dumped it into the Mississippi River, the whole world would have been horrified.

INEQUALITIES IN ABILITY TO PAY FOR CARE

Some of our babies do not have the sense to choose their parents wisely; in 1940 something like half our children were living in families with an income of less than \$20.00 a week. It is obviously impossible for any family living on such an income to buy adequate medical care out of its own resources.

To make matters worse, the lethal effects of low income are

aggravated by pigmentation of the skin, for the maternal mortality rate is more than two and a half times higher among Negro mothers than among whites, and the infant mortality rate is almost twice as high as among whites.

There is no need for me to belabor the statistics further or to enumerate figures for other fields of health care, for social workers see them at first hand. The fact is that in 1942, which was a prosperous year, 70 percent of the families in

Dr. Mendell is a member of the Executive Committee of the Physicians Forum, a national organization of doctors who are concerned: first, with the quality of medical care; second, with the widest possible distribution of the highest quality of medical care; and third, with the practical attainment of these ideals through a system of prepayment. Because the Physicians Forum believes that citizens and consumer groups interested in medical care must work actively for passage of the Wagner-Murray-Dingell bill, it is giving wide distribution to the pamphlet *For the People's Health* as well as a brief summary of the provisions of the Wagner-Murray-Dingell bill and a Prescription leaflet to be presented by the consumer to his personal physician. The Forum will also send to leaders of organizations a comprehensive analysis of the health features of the Wagner-Murray-Dingell bill and a Speakers' Manual. Material may be ordered from the Physicians Forum, 510 Madison Avenue, New York 22, N. Y.

our country had incomes of \$3,000.00 a year or less, and even the American Medical Association has admitted that such families need assistance in meeting the cost of catastrophic illness. The point is that even though such large sections of the population cannot afford to meet these costs as individuals, they can well afford to do so through a national health insurance system.

In order to supply adequate care, the facilities for delivering it must be available. Doctors choose to practice in communities where they can hope to earn a living and so we find great variations in the distribution of doctors throughout the country. For instance, in New York City there is one doctor to every 700 people, but in Mississippi there is only one doctor to every 2100. Some communities are poorer than others and cannot afford to construct the hospitals and laboratories which are so essential to the practice of medicine. Thus, in New York City, there is one bed in a general hospital for every 196 people, but in Mississippi there is only one for 667. By pooling all our resources, this country is rich enough to supply such facilities wherever they are needed.

A national health insurance plan would eliminate the financial barrier which prevents large numbers of people from securing adequate medical care from their individual resources. This would at once encourage the better distribution of general practitioners and specialists throughout the country. The establishment of hospitals and other diagnostic facilities in the areas where they are so sorely needed would in turn attract physicians because it would permit them to deliver medical care of a high standard.

NEW WAGNER-MURRAY-DINGELL BILL

The medical section of the new Wagner-Murray-Dingell bill (S. 1050) gives us the opportunity to put these principles into practice. It provides for the construction of health facilities, for the expansion of public health services, for the improvement in maternal and child health services and for prepaid personal health service insurance for 135,000,000 people, in addition to the other social security provisions which would enhance the security of the people as a whole.

Now this matter of compulsory health insurance is one of the most inflammable subjects of discussion of our time. All kinds of emotional reactions ensue when you just mention it. Lots of laymen think it would be a very good idea because after all it is they who are up against the problem of getting good medical care and of paying the bill. Organized labor backs it, for the unions are well acquainted with the state of health insecurity of their members. Some enlightened industrialists have discovered that the provision of medical care cuts down absenteeism and reduces costs.

But it is among the doctors that the greatest diversity of opinion exists. The spokesmen for the organized profession have used all the highly emotional clichés which are best calculated to obscure thought: "rugged individualism," "free enterprise," "political medicine," "medical bureaucracy," "socialized medicine," "socialism" and finally "COMMUNISM!!". No phrase is too violent to be hurled against the "revolutionary" idea of spreading the costs of medical care on a national basis.

RELATIONSHIP BETWEEN PATIENT AND PHYSICIAN

As a matter of fact, the Wagner bill in no way alters the structure of the relationship between patients and doctors; it merely alters the method of paying the bill and establishes the mechanism for collecting the funds. Literally, the bill would enlarge PRIVATE practice because it would practically eliminate the medically indigent group which now has to seek medical aid from city, state or charitable institutions, and allow these people to seek the services of physicians in private practice.

However, the opinions of the spokesmen for the A.M.A. do not accurately reflect that of the doctors as a whole, although unfortunately it is only these opinions which appear in the official Journal of the A.M.A. and hence influence the thinking of the doctors. There are also other considerations which tend to restrict the expression of minority opinions among doctors, so that it is a very healthy sign indeed to be able to report that other points of view are gradually spreading among groups of physicians and specialists.

One of the outstanding illustrations of this trend is the fact that in 1944, the American Academy of Pediatrics unanimously adopted as its objective for child health in the postwar period the following:

To make available to all mothers and children in the United States of America all essential preventive, diagnostic, and curative medical services of high quality which, used in cooperation with other services for children, will make this country an ideal place for children to grow into responsible citizens.

In keeping with such a high purpose, it was natural that the Journal of Pediatrics, which is the official organ of the American Academy of Pediatrics, should be the first medical journal to open its pages to the frank discussion of the social aspects of medicine. With its issue of August 1945, this Journal started a new department entitled "The Social Aspects of Medicine," and states: "... it is not a department of propaganda for or against anything except intellectual dishonesty. ... Cannot we pediatricians with our

splended heritage and ideals of service, show that these important questions can be discussed fairly, intelligently, and unemotionally. . . .?"

The editor of this new department of the *Journal of Pediatrics*, Dr. Edwards A. Park, says in part: "The truth is that scientific advances in medicine have far outstripped their social applications. People are beginning to realize that there exists a better kind of medicine than is generally available. . . . Therefore, at this critical time, the social questions pertaining to medicine are every bit as important, if they are not more important, than the scientific ones. . . . We must attempt to obtain a detached point of view and if new ideas seem on adequate study good, we must not be afraid to try them."

The social vision of the Academy of Pediatrics, and the quotations above are so unique in medical circles that they are worthy of comment and applause. If they were emulated by the A.M.A., advances in the technics of distributing adequate medical care would more nearly parallel the progress in our technical knowledge.

THE DOCTORS CHANGE THEIR VIEWS

Another healthy development in recent years, has been the steady growth of the Physicians Forum. This is a national organization of doctors interested in the study of the problems of medical care and the dissemination of such information among physicians and the public. It is concerned first, with the quality of medical care; second, with the widest possible distribution of the highest quality of medical care; and third, with the practical attainment of these ideals through a system of prepayment. All its members are also members of the A.M.A. or of the National Medical Association.

The Forum believes that medical care concerns those who receive it as much as those who give it and that cooperative efforts between the two groups will more quickly bring about the changes which will make the best care available to all the people.

These doctors also believe that the doctors themselves have a great stake in the passage of the Wagner-Murray-Dingell bill because, first, it would give them the gratification of practicing medicine of a higher standard than is now possible under the financial restrictions of the individual patient's ability to pay; and second, that it would provide the doctors themselves with an economic security which they have not previously enjoyed.

It will cost money, undoubtedly. But if that needs justification I should like to quote a statement by Brigadier General William C. Menninger, Chief of the War Department's psychiatric division, to the Senate Banking Committee during the recent hearing on the Murray full employment bill:

If we can spend two million dollars developing one instrument of destruction, what is the mental health of the country worth?

In the final analysis the health of the people is intimately tied up with the welfare and security of the nation as a whole and one of the functions of Congress is to promote the general welfare. Ultimately Congress will have to take under serious consideration the question of social security as a whole, and of medical care which is an essential part of it. The speed with which this will occur depends on the effective pressure of the people themselves.

A National AASW Directory

The AASW is planning to publish a membership directory in 1946. The last one was published in 1936 and is still being used even though it is considerably out of date. Although we would like to include the same type of biographical information about our members in the 1946 directory as was in the 1936 edition, this will not be possible because of the cost.

The National Board is aware however of the urgent need for an up to date listing of members for the use of Association chapters and committees as well as for service to social agencies and community groups. It has been decided therefore to publish a directory containing an alphabetical listing of name, address, agency connection of member and title of position held, supplemented possibly by a geographical list of names. It is especially

appropriate that this directory will come out in our 25th anniversary year.

The cost of publishing even this limited amount of information about our nearly 11,000 members is considerable and can only be covered by the Association if members and others buy the directory promptly so that income can be realized on the project during 1946. Present plans call for sending a return postcard to all members about December 15, 1945, and for issuing the directory by May 15, 1946. It is important that changes of address be registered in the national office as soon as they occur. Members should send changes directly to us rather than chapters. The last known address of a member will be used in the directory.

The AASW's Housing Proposals

By SYDNEY MASLEN

Secretary, Committee on Housing, Community Service Society of New York

THE nation is facing perhaps the most critical housing deficit in its recent history. National Housing Agency officials estimate that the present vacancies throughout the nation, which now number 600,000, will be more than taken up within a year by some of the 1,300,000 returning veterans, who already are married or are expected to be married shortly after returning to civilian life.

Suitable housing at rentals within the reach of various income groups is widely recognized as the most acute post-war need both for veterans and civilians alike. On the other hand, the largest single opportunity for the rapid post-war expansion of private investment and employment, according to President Truman in his message to Congress on September 6th, lies in the field of housing.

Four years of war have resulted in this vast housing shortage due to curtailed construction of all but war housing. Due to lack of repairs many existing dwellings have become run down. Wartime marriages and increased incomes have accentuated the demand for dwelling spaces.

On August 1st, after many months of preparation, S. 1342, to be known as the General Housing Act of 1945 to establish a post-war national housing policy and provide for its execution, was introduced in the United States Senate by Senators Wagner and Ellender. On the same date Senator Taft filed with the Senate and made public the Report of the Subcommittee on Housing and Urban Redevelopment of the Senate Special Committee on Post-War Economic Planning and Policy. The basic principle of both the Bill and the Report is that the construction and financing of housing for the overwhelming majority of citizens should be done by private enterprise.

The bill was drafted on the basis of testimony before the Taft Subcommittee. Its basic philosophy is a belief that the housing industry is a bellwether of economic conditions generally, it having been shown to the satisfaction of the subcommittee that fluctuations in economic conditions through-

out the nation between 1920 and 1940 followed the rise and fall of the volume of the housing construction industry. The objective of the legislation is to attain an annual investment in housing construction throughout the nation of from six to seven billion dollars in the next ten years to help stabilize the national economy, alleviate the housing shortage and bad housing conditions, and to provide jobs for from four to four and one-half million workers a year.

MAIN FEATURES OF THE BILL

It recognizes the need for every American family to have a decent home in which to live. Wherever this need can be met by private industry or local communities it should be done so, but, where necessary, the federal government should help in the financing.

It makes permanent the National Housing Agency under which all housing functions of

the federal government were unified during the war for greater efficiency.

It creates a research program under the National Housing Agency to find ways of producing better housing at lower costs.

It increases federal contributions to low rent, slum clearance projects to 88 million dollars a year for four years. This would be sufficient to provide houses for 125,000 families annually. A gap of 20 percent would be required between the upper rent limits of public housing and the lower rent limits of private housing.

It provides for a five year program of federal contributions up to 20 million dollars per year to aid cities in buying and clearing slum areas for redevelopment by private enterprise or public bodies. The funds would be used to reduce the price of the land so acquired and to make it available for development at a cost that would be economical for its new use.

It encourages insurance companies to invest in moderate rental housing by guaranteeing private investors a 2¾ percent return on their investments in the construction of large-scale housing developments for families of middle income.

Sydney Maslen is a member of the AASW Committee on Organization and Planning of the Social Services in the War and Postwar Periods and chairman of the Subcommittee on Housing. The subcommittee has completed work on a suggested platform statement which will be submitted to the Delegate Conference for consideration and action. Other members of the committee are: Dorothy Black, Mrs. Florence Conlin, Dr. Emil Frankel, Dr. Hertha Kraus, Eleanor Portser.

It provides a five-year program for federal contributions up to 25 million dollars a year for construction of rural housing by public bodies or private builders.

It provides that permanent war housing built by the federal government can be sold to local authorities for low-rent housing if the localities can show they have such a need.

THE AASW'S POSITION

The American Association of Social Workers, through its executive secretary, was invited recently to express an opinion on this legislation to the National Housing Agency. COMPASS readers will no doubt be interested to hear of the basis upon which our response was made.

In November 1944 the national Committee on Organization and Planning of the Social Services in the War and Postwar Periods created a Subcommittee on Housing. The assignment to the subcommittee was as follows: To develop material which could be made available to chapters for the purpose of encouraging discussion of the subject matter assigned to the subcommittee for study and to outline the issues and problems and formulate a statement outlining the Association's position on the subject area being studied, for consideration and action at the next Delegate Conference. The immediate job for the Subcommittee on Housing is to revise and bring up to date the statement on housing which is at present a part of our platform on Public Social Services. The subcommittee drafted a platform statement on housing which was submitted to the full committee in the spring. With certain modifications to conform with the style of the other platform statements, the platform was approved.

On September 21, 1945, the following letter, which was prepared on the basis of comparison of the Wagner-Ellender Housing Bill with the platform statement, was sent to the National Housing Agency. It is the intention to follow this up with representations to the Senate when hearings on the bill are scheduled.

Hon. John B. Blandford, Administrator
National Housing Agency
Washington 25, D. C.

Dear Mr. Blandford:

The American Association of Social Workers, through its constituted committees, has in recent months studied the question of a national housing program. The following comments on S. 1342 are therefore made in the light of the findings of our committee, and represent their views.

This Association strongly supported the Wagner-Ellenbogen Bill to establish a United States Housing Authority in 1936, and has supported subsequent amendments to that Act. We reiterate our position that good housing should be provided

under private or public auspices or a combination of both for all people in the local community at rentals that come within the tenants' means, or at a selling price based on an ability to purchase. For this reason we favor passage of S. 1342. We believe that the bill represents marked progress toward the formulation of a postwar American housing program.

The American Association of Social Workers recognizes the necessity for measures to increase the supply of good housing by new construction to meet all special needs, including (1) the large family, (2) persons living alone, (3) the aged, (4) those with special health problems, and also (5) for migratory persons in rural as well as urban communities. The public housing program heretofore has not made sufficient provision for families with these special needs. We would like to know whether housing to meet these special family needs is contemplated by this bill? If not, we recommend that the bill be amended to include these groups.

We believe, furthermore, that consideration might well be given to amendment of S. 1342 in the following particulars:

(1) Amendment of Title V, page 41, to permit eligibility in public housing of any families whose income is too low to enable them, *without sacrifice of other essentials*, to secure a decent, safe and sanitary dwelling provided by private enterprise.

While provision is made under Title V, page 41, for families of low income who have lived in an unsafe, unsanitary or overcrowded dwelling, and families of servicemen, other families of low income who are not living in slums or bad housing would be ineligible. We refer to those families of high standards but low income who, to escape slum living, pay a disproportionate part of their income for decent housing. All families in this category should be eligible for public housing.

(2) Amendment of the bill to assure that decent, safe and sanitary dwellings, substantially equal in number to the proportion of substandard dwellings to be removed from a site of a federally-aided public housing project, are available or will be provided in the locality at rents or prices within the financial reach of the families displaced.

The bill now provides under Title III, on page 11, paragraph (2) a method to assure rehousing in dwellings within their means of families who have been living on the site of urban redevelopment projects. Slum clearance projects, however, built under Title V without benefit of Title III, should be required to provide the same protection to site residents.

(3) Amendment of the bill to assure that government subsidies and services are available both for public housing and for properly regulated housing built and operated by non-profit private organizations such as cooperatives, foundations, and social and philanthropic agencies.

(4) It seems clear that the investment of social

insurance reserve funds in housing programs would provide a reservoir for sound investment at low interest rates. Such an investment would benefit both the housing program and the social security program. The bill should make provision for this.

(5) Title II should be amended to assure to local housing authorities broad assistance to appraise and regulate local housing.

The provision for N.H.A. demonstration procedures for making local housing market studies, specified in Title II, Section 204, page 6, of the bill, is not enough. In order to assure local participation in a comprehensive national housing program and to remove the obstacle to cost reduction of obsolete building codes or other local

ordinances, communities should be able to secure from the National Housing Agency assistance in drafting or strengthening local building and housing codes. This should help to assure economically feasible local codes and ordinances and would set forth minimum legal standards of healthful housing.

I want to assure you of our Association's desire to cooperate with you to the fullest extent in perfecting and broadening S. 1342, looking toward establishment of a comprehensive national housing program.

Sincerely yours

Joseph P. Anderson

Executive Secretary

American Association of Social Workers.

A Social Work Program for Full Employment*

FULL employment is the No. 1 problem for post-war world planning. Every opinion poll places it there. Social workers placed the right to work at the head of their platform on the public social services. It is at last recognized that world security and peace depend on full use of all resources of manpower and productive capacity. Whether the goal is stated in terms of 60 million jobs, purchasing power to sustain profits, or a rising standard of living, there is a swelling chorus of hope and faith that the world will never again allow itself to lapse into periodic depressions. If this is to be achieved, the business of work must be regarded as it has been during the war—as a dedication to high purposes. The supply of work must continue to surpass the supply of workers.

Social workers of necessity hold certain beliefs about employment and from them proceed to specific proposals. Some of these convictions may be stated as follows:

1. *The need for labor is limited only by the world's need for goods and services.*

The total need for workers is no longer unpredictable. It is not an irrational factor influenced only by "world markets," "prices," or "enterprise." The need for workers can be gauged by the world's need for goods and services to supply the constantly rising standard of living for the

earth's population. This approach, supported by developing international programs of finance, food supply, and cooperation for peace, will require all the effort that the world's working population can supply for generations to come.

2. *Work must be satisfying and provide a decent living.*

Employment, even if it occupies a worker's full time, does not meet his requirement unless it provides wages that will purchase a decent living and uses the worker's skill.

3. *Mobility of labor and retraining must be assured.*

If the number of available jobs does not match the available skills, or if the jobs are in one place and the workers who could best fill them are elsewhere, freedom of choice can be assured only if it is made possible for workers to move from place to place with responsible guidance and without force or to secure appropriate retraining for available tasks.

4. *There need be no involuntary unemployment in a free society.*

Full employment does not mean a regimented labor force in which every person is somehow employed at every moment. Full employment is consistent with free choice of job and mobility of labor. It means distinguishing between *enough jobs* to employ all who can work at suitable occupations and the *maintenance of a "labor reserve"* that tends to force down wages. If workers are to be free to choose jobs, and employers to choose workers, there will be periods when individuals will be "in the market." These periods should be

* This statement, prepared by Dorothy Kahn at the request of the Social Work Action Committee, Box 294, Madison Square Station, New York 10, N. Y. (formerly *Social Workers' Emergency Committee*), is the first in a series which the committee hopes to offer on social work action. The statements are intended to follow and make specific the general principles expressed in the statement, "TO SOCIAL WORKERS: A CALL TO ACTION," published in THE COMPASS, April, 1944.

short and the income loss they represent should be compensated so that no worker is forced into unsuitable work.

Social workers have their special reasons for thinking about employment in this way. Their experience teaches them that men work because of an inner need to create and achieve. They are not afraid that the removal of the driving threat of hunger will result in a growing "rocking chair brigade" who will rest while others labor for them, thus leaving the work of the world undone or in need of excessive effort from a few willing hands.

Social workers have seen more of deteriorated work habits than any other single profession and they know that such deterioration, whether it be characterized as "laziness," "inefficiency," "clock watching," or plain "cussedness" has its roots either in social or personal maladjustment. Unsatisfying work, work that is too hard, hours that are too long, returns that do not even provide for decent subsistence—these are the enemies of production and not natural sloth. Everyone is lazy sometimes. No healthy person is lazy all the time.

The removal of the deterrent aspects of work, the assurance of a decent living and of really free choice would release resources of personal energy and effort such as the world has never known. The war and its tasks, hideous, repetitive, and immediately unrewarding, should have proved to the world what social workers know—that no work is so inherently distasteful, but that, if necessary, it will be done, not by compulsion but by common consent. Even the compulsions we have invoked in war have been measures of economy and speed and they could not have been invoked in a democracy without common consent. The War Department made available a pamphlet on "Will There Be Work For All?" called GI Roundtable EM-22. Addressing men now in service it says in part:

"Unemployment does nobody any good. Next to war it is the most appalling kind of waste in modern human relations. Ironically, war does away with it more quickly than anything else—but less permanently. . . .

"One thing we have learned: Mass joblessness is not inevitable. We have come to understand that employment rises and falls not in accord with some supernatural law but in response to human decisions, purposes, and activities. What has happened in the course of our wartime effort to defeat a common enemy ought not to be impossible to achieve in a peacetime effort to make a common living. If we can put forth the same effort and imagination toward preserving peace that we have put into the making of war, abundant employment will reward us.

"Employment, thus, becomes not an end in itself but a result of larger and more compelling purposes. Whether it develops to the full will depend,

it would seem, on two things: (1) what kind of plans we make and what steps we take to put them into effect, and (2) whether as a nation, or a society of nations, we can muster as much determination to win a productive peace as we have mustered to produce victory in war."¹

Given this view of the relation of work to life, to what specific proposals do social workers subscribe? We suggest at least these:

I. Balance the human budget of the world as the basis for employment of human energy by making the total need for goods and services the yardstick for fiscal policy and world trade.

II. Release the resources of materials, invention, and management so as to satisfy at least the basic material requirements of living with less expenditure of effort.

III. Reduce hours of work, raise the school-leaving age, and lower the retirement age as rapidly as possible.

IV. Recognize the infinitely expanding role of services in total employment as of equal importance with the production of goods.

V. Promote joint planning by government, industry, and labor to achieve a minimum of controls and a maximum of initiative.

VI. Promote private and governmental services that will facilitate access to resources of natural and human power, such as new laboratories, agricultural methods, power dams, health, vocational and social services.

VII. Recognize the fact that differences in levels of living among different races, nations, or occupations are accidents of time, place, and the tempo of civilization and are not indications of relative worth or importance in human society.

VIII. Develop a positive role for public work, not as a stop-gap for unemployment, a pump-primer, a yardstick, or a relief measure, but as a partner to private enterprise taking over those activities which can be more economically and safely performed under public auspices in the interest of the whole people, limited neither by geographic nor political boundaries.

What can social workers do about these proposals?

I. Inform themselves on the issues which will determine whether we shall have full employment. These are the issues that are wholly within our grasp of understanding and susceptible of influence.

Read materials that show how this can be done, such as:

¹ The American Historical Association, Washington, 1944, p. 4.

Jobs and Security for Tomorrow. By Maxwell S. Stewart. No. 84 of *Public Affairs Pamphlets* published by Public Affairs Committee, 30 Rockefeller Plaza, New York 20, N. Y. (1943).

As We Win. Report No. 1 of the Department of Research and Education, CIO Postwar Planning Committee, 718 Jackson Place, N.W., Washington 6, D. C. (1944).

Employment After the War. By John H. G. Pierson. Published by Postwar Planning Committee of the American Federation of Labor (1943).

Enough and to Spare. By Kirtley Mather. Twentieth Century Fund *When The War Ends* series, by Stuart Chase.

Full Employment in a Free Society. By Sir Wm. Beveridge.

II. Focus now on Legislation that affects:

Administration of manpower controls

Watch legislation and administrative orders relating to wage rates, selective service deferments, priorities, cutbacks. Start now to promote assistance in relocating displaced war workers and abolish settlement laws.

International relief and rehabilitation and international trade

If the world is our market watch out for fiscal and other policies that will start trade wars and reduce living standards while tariff walls go up.

Social security

Promote expansion of social security now to include all those not covered by unemployment and old age insurance and assistance, and sponsor development of public health and medical care.

Public work

See what your community is doing to assure public as well as private employment, not only to build needed public buildings, but to provide appropriate public services.

III. Collaborate with other groups with similar objectives.

Remember that once the spiral of unemployment has started it is too late to plan constructively. Let us use our influence to keep production in line with peacetime needs as we have made it meet the needs of war. It can be done.

Toward a More Adequate Social Security Program

A Review of Pending Legislation

By JOSEPH P. ANDERSON

Executive Secretary, American Association of Social Workers

The need of filling the gaps in our present social security structure has been sharply intensified by the abrupt termination of the war. The stress and dislocation of the reconversion period bring into focus the ways in which we have failed to establish essential social protections. The major weaknesses of our present social security system are reflected in the large segment of our population which has no access to the protections offered under existing laws, and by the many hazards which contribute to the loss of earnings for which no adequate provision in our present programs exists. It is encouraging that so much attention is being given to methods for increasing production and opportunities for useful work for everyone. There is general acceptance of the desirability of raising the standard of living for all the people. A more adequate social security program will help us achieve this objective. By helping

to maintain purchasing power and reducing the fears and insecurity created by loss of income, a program designed to offer maximum security to all persons can do much to strengthen our economic system and promote the welfare of all the people.

During the past year three legislative proposals to amend the social security law have been introduced in Congress. A summary of these proposals is presented here.

WAGNER-MURRAY-DINGELL BILL
(S1050—H.R. 3293)

Section 1. Short title: Social security amendments of 1945.

Sections 2 and 3. Grants and loans for construction of health facilities: Provides a 10 year program of Federal grants and loans for construc-

tion and expansion of hospitals, health centers and related facilities to be financed out of general revenues. The Federal Government will pay at least 25 percent of the cost of a project and up to 50 percent in accordance with a State's per capita income. Loans may not exceed an additional 25 percent of the cost of the project.

Section 4. Grants to States for public health services: Provides Federal grants to States from general revenues for expansion of public health services. The Federal Government will pay at least 25 percent of the amounts expended by a State and up to 75 percent in accordance with a State's per capita income.

Section 5. Grants to States for maternal and child health and welfare services: Provides Federal grants to States from general revenues for maternal and child health and welfare services. The Federal Government will pay at least 25 percent of amounts expended by a State and up to 75 per cent in accordance with a State's per capita income.

Section 6. Comprehensive public assistance program: Provides for Federal grants to the States for public assistance to needy individuals—aged, blind, dependent children, or others. Federal Government will pay at least 50 percent of amounts spent by States and up to 75 percent for States in accordance with a State's per capita income.

Sections 7 and 8. A national system of public employment offices: Provides for a continuation of Federal operation of the United States Employment Service.

Section 9. National social insurance system: Consisting of health insurance, unemployment insurance, temporary disability insurance, and retirement, survivors, and extended disability insurance.

PART A. Prepaid personal health service insurance: Provides for insurance of medical care costs; not State medicine.

PART B. Unemployment and temporary disability insurance benefits: On a Federal basis. Benefits of \$5 to \$30 per week up to 26 weeks; if funds are adequate, up to 52 weeks for unemployment.

PART C. Retirement, survivors, and extended disability insurance benefits: Provides for more liberal benefits than existing law. Minimum \$20 per month; maximum \$120.

PART D. National social insurance trust fund: All funds invested in United States Government bonds.

PART E. Credit for military service: One hundred and sixty dollars wages credited under the insurance system for each month of military service.

PART F. Coverage provisions and definitions: Extends coverage to about 15,000,000 additional persons.

PART G. Social insurance contributions: Four percent each on employers and employees. Government contribution authorized when necessary.

PART H. General provisions: Judicial review, national advisory council and rehabilitation of disabled persons.

Section 10. Definitions.

GREEN BILL (S1188)

1. Provides that the federal government match all state payments for needy persons with proportionately higher matching to the poorer states.

2. Provides disability benefits and hospital benefits in addition to old-age and survivors benefits, and extends the coverage of this system to practically all gainfully employed persons.

3. Treats service in the armed forces as a service in covered employment, with the federal government making the necessary contributions.

4. Replaces the present unemployment insurance provisions by a grant-in-aid system under which the federal government would meet 50 percent of the amount spent by the state in providing benefits for unemployment and for temporary disability.

PEPPER BILL

The proposed "Maternal and Child Welfare Act of 1945" is an independent piece of legislation to enable the states to make more adequate provision for the health and welfare of mothers and children and for services to crippled children. It is based on the principle of Federal grants-in-aid to the States, and places administrative responsibility on State governmental agencies. It is supplementary to the provisions of Title V, Parts 1, 2 and 3, of the Social Security Act but does not replace or amend that Act. Incorporated in the bill are such other administrative practices as have proven successful during the past ten years of Federal-State financing and operation in these specialized fields of public interest. The services under this proposed Act will benefit all mothers and children who may elect to participate. This bill sets forth how the Federal and State agencies will cooperate with medical and other professional groups and provides methods for consultation with public representatives.

Let's Abolish "Social Chase Work"

Dear Myron:

I have before me your letter in which you remind me of my agreement that I was to have until November 15th to prepare an article built around the phrase "Social Chase Work." Our agreement was, you remind me further, that if I did not make use of it by that time, its "copyright" would expire and it would become public property, at which time you would have full "right" to the use of it.

This note, in reply, is to tell you that, having considered the matter from every conceivable viewpoint and taking into account all of the factors involved, I have decided to meet your terms and to surrender the idea for your immediate use. Please do not think that I have arrived at this decision lightly nor without some regret. I shall think of "Social Chase Work" often and always with long and loving thoughts and I shall watch its progress with considerable interest. Many a pleasant moment was spent in developing plans for the future use of the idea, and long-held ideas, I have discovered, are not easily relinquished.

I want you to know, too, that when I returned to Chicago from Baton Rouge, I was literally rubbing my eyes in bewilderment, wondering how I ever let you wrest that idea from me, remembering my long devotion to it and protection of it! The conditions which you imposed upon me for its immediate use or "unconditional surrender" caused me to spring into feverish activity and resulted finally in my decision to transfer my idea to you. The simple truth of the matter is that after all these years of hoarding it, I have found the phrase impracticable to use in an article; and if you are interested in knowing why, the explanation follows.

The purpose of such an article is clear enough in my mind. It would have been to point out, again, the fallacy of the application of the settlement laws for dealing with people in distress and to urge their complete abolition. A number of good points could have been made in support of this thesis. First, I would have stressed the need to change our mental picture of the person who finds himself without a settlement. The popular attitude is that the non-resident or transient person is the traditional vagabond beggar or unstable worker and therefore an undesirable member of a community. This attitude is as outmoded as are the restrictive laws by which such persons are provided for by a community. The ancient method of "passing on" from one community to

another is directly attributable to this attitude which has become so firmly established as to defy extraction. Therefore, the first step in the abolition of the settlement laws is to change the idea that non-residence or transiency is synonymous with vagrancy and instability. In most cases the non-resident or transient person is an average or above-average mobile worker seeking to make the best adjustment possible in an uncertain labor market. Studies have shown that he is representative of the community as a whole and, except for his non-residence, can not be distinguished from any other group in the community. Often he is the person who is unwilling to sit by in his legal settlement when there is work or rumor of work elsewhere. Social workers would surely understand this, since they are by far the most mobile of all workers.

No one can deny that the habit of change and movement, which greatly increases during times of crisis (war and depression) and which results in tenuous family ties and widely separated family members is a persistent and troublesome problem. But neither can one

overlook the conditions peculiar to American life which have tended to create this situation—among them being: variations in climates creating differences in cultivation and harvest and resulting, therefore, in the development of mobile labor which follows the crops for brief periods of employment; cycles of employment and unemployment in certain industries which draw from the reservoirs of mobile labor for brief periods of time when demands are heavy, but drop them when the emergency is past; technological changes causing the discharge of workers in one community and their consequent movement to another in search of employment; the trend of population from rural areas to urban or vice versa; and the inadequacy of facilities for the care of the needy in the place of their legal settlement leading to their migration in the hope of betterment.

This first point, in short, would have been that there are many factors which enter into the migrations of peoples. Our economic, industrial and agricultural systems have demanded and encouraged a fluid labor market supply throughout history. Yet the provisions for the care of members of that group, if they fall into distress, are fixed and focused to an earlier period in history.

The earliest settlement laws and then later the poor laws with the settlement provisions came as a result of the breakdown of the English feudal

Myron Falk is Executive Director of the Community War Chest of Baton Rouge, Louisiana. He is an active supporter of the cause of the migrant.

Leona Massoth is Executive Secretary of the American Association of Schools of Social Work.

system, under which the great majority of the people occupied a predetermined place in society and a fixed abode under some immediate superior. They were called the "rogues," the "vagabonds" and the "sturdy beggars," but they were the people who, because of the social and economic upheaval caused by the breakdown of the feudal system, flowed across the country in search of employment, homes and opportunities. Penal statutes were passed, with increasingly severe penalties, in an attempt to return peoples to their "fixed abode" and to restore the status quo. But no legislation, however severe, could stem the tide—for the legislation failed to take into account the causes of the migration. In time the rigors of the laws of settlement abated but by that time the principle of settlement and local responsibility for those in need of relief had become inherent in the very character of poor relief.

The American colonies, inheriting as they did the English poor law, accepted the principle of settlement with it. However, it was not until free land was exhausted, local civil governments formed and state boundaries defined, that the settled and established elements with vested resident or property interests began to look with suspicion and distrust upon the newcomer and to invoke the protection of the settlement laws against him.

Secondly, I would have stressed the point that any community has more responsibility toward a person in need than to deal with him temporarily "pending return to place of legal settlement." In many cases, although technically non-resident, the person has claims upon a given community by virtue of his interest in the community or by the presence of family or personal ties. In other instances, even when the individual has no claims upon the resources of the community, his right to life, liberty and the pursuit of happiness in the community of his choice is his inalienable right as a citizen of this land. Since this principle of self-determination is at the very core of our profession, it seemed too elementary to present to social workers. The Supreme Court decision in *Edwards vs. the State of California* is interesting in that it gives support to this principle of self-determination.

A third point would have been something like this: it is a fallacy to think that all people who fall into distress in a state where they have no legal settlement can be adequately dealt with by determining legal residence elsewhere. Plenty of cases could be cited to show that it is not only unreasonable but also impossible to handle the problem in this way.

A fourth point which I would have stressed is that not only does the variation in laws create problems but so also does the variation in administration of the laws. Frequently, also, social workers and others administering the laws think

first of the application of the "letter of the law" rather than the best interests of the family.

No one will deny that these are difficult problems for public as well as private welfare agencies. What I am pleading for is an abandonment of the laws that make possible a policy which, ignoring the existence of these problems, is content to accept the old principle of temporary assistance and of "passing on" the individual and his problem to the next community.

Once in the long history of my interest in this question, I concluded (see unpublished Master of Arts thesis, University of Chicago) that the best we could hope for was to get uniform settlement laws. But life and leisure have changed to such a remarkable extent in the past ten years that uniform settlement laws are no longer practicable. There must be quite a few of us now who have a conviction that we must constantly discuss settlement laws until the day we accomplish complete abolition of them.

Now is the time, I would have said in a strong closing paragraph, to get the settlement laws repealed. If this is not done while employment is still at a fairly high level, we will inevitably see the states taking action to raise rather than lower barriers. In fact, there are already observable tendencies in this direction.

"Chase Work," it occurred to me when I was studying this question historically, was the term which best describes the method resulting from the long application of the settlement principle; namely, the avoidance of responsibility for the care of non-resident persons. The familiar term of "passing on" is too passive and sounds too friendly. More often a much more dynamic process was in operation which is better described by the term "chase work." Let me illustrate:

"... and if they can not find surety, they shall be sent to the next gaol, there to abide till the coming of the justices . . ."

"... and if any servant or laborer be found in a city, burrough or elsewhere, coming from any place wandering without a letter (giving permission to wander) he shall be taken forthwith by the mayor, baliffs, stewards, or constables and put into the stocks until he found surety to return . . ."

"... and be it enacted that every person which by this act is declared to be a rogue, vagabond or sturdy beggar shall upon his apprehension be stripped naked from the middle upward and shall be openly whipped until his or her body be bloody and shall be forthwith sent from parish to parish until he or she arrive back to the parish where he was born."

These are excerpts from the old settlement laws, which admittedly have become less cruel, but the cruelty of the idea persists even today. A "warning out" system, also a remnant of the 16th to

17th centuries, is not entirely in disuse in this country even now.

In spite of the fact that the purpose of the article is clear and the content there (I haven't suggested all the content), I decided against writing it. Three reasons entered into my decision. First, I didn't think I could add materially to the already available literature on the subject. Social workers who are not already familiar with the primary source material would do well to turn to these rather than to another secondary summary. If one has this sense of the antiquity of this problem, then the social, economic, and health as well as the legal implications which I stressed will have more meaning.

Secondly, for some unaccountable reason the article didn't seem to grow. I began, as I mentioned earlier, in a state of feverish excitement. I had accumulated a considerable file as well as active interest on this subject—one page read "Thoughts on Social Chase Work." I was in the literary mood to spin off an uncommonly good article, but after my strong opening sentence which went like this, "There was social chase work in the world long before social work," I had nothing more to say.

Finally, I was perplexed by the question of title. What shall it be? "What Is Social Chase Work?"? "The Development of Social Chase Work—Its Theory and Practice"? "Social Chase Work as a Method in Social Work"? "Social Chase Work, Generic and Specific"? Obviously, none of these was right; they were all misleading. Social workers might have misinterpreted my intentions to be either humorous or sarcastic. I was never more serious. It was then I realized I have a very clever phrase on my hands, but that its use was very definitely limited. Perhaps its use is in the phrase only, but at any rate, since I need something more than a catch phrase and a strong opening sentence, I decided to transfer my idea to you, thus relinquishing all claims to ownership and all rights to authorship.

Sincerely yours,
Leona Massoth, Chicago, Illinois.

Postscript: I am intrigued with your idea that we must be ready with a second cause as soon as we accomplish our goal in this one. As for me, I believe my second cause will be the cause of bringing causes back into social work. But that is subject for another discussion.—L. M.

Air Combat Intelligence Some Applications of Social Work Technique

BY LIEUTENANT DAMON A. TURNER *

Army Air Corps, Member Cleveland Chapter, AASW

THE universal nature of social work principles is a matter of common knowledge to social workers. The priest in the confessional, the listening wife, the sympathetic mother, or the understanding friend touch upon an area in which the professional social worker daily applies his skills. The desire of people to seek understanding and counsel lies at the root of all social work. The scientific use of this knowledge to establish case work relations with other human beings is fundamental in the successful practice of social work.

There seems to be no clear cut line of demarcation between the area of human relations wherein the social worker is engaged and other fields of human activity, which impinge, in some respects, upon social work. Thus the relationships established by the doctor with his patient or the lawyer with his client make use of the same principles utilized by the social worker. In the horror, carnage and death of war, it is not strange, then, to observe unconscious application of some social work techniques by persons most of whom would

confuse social work with the giving of alms. Such an application occurs in the work of the air combat intelligence officer.

Military intelligence is that branch of the military effort concerned with discovering everything possible about the strength and the weakness of the enemy. In the great war so recently ended the crew of the military aeroplane procured by far the majority of our knowledge of the enemy. Aerial photographs and the visual observations of returning airmen have enabled us to know the enemy as no belligerent could in 1914-1918.

Contrary to the cinema the information secured from the Mata Haris and the "cloak and dagger boys" constitutes only a small portion of our intelligence. Even the interrogation of prisoners of war yields scant, often unreliable information compared to the vast knowledge to be gleaned from the crews of aeroplanes just returned from flights over enemy territory.

It is the function of the air combat intelligence officer to get this information and to make use of it. Fresh information means new knowledge of the enemy and it is available after each flight.

* Lt. Turner's article has been cleared for publication through the War Department, Bureau of Public Relations.

It must be collected and channeled up to higher commands where it can be evaluated and disseminated throughout the military establishment. The chance observation of a flyer, if known, may sink an enemy vessel or save our own forces from attack. Intelligence officers have likened the process to a jigsaw puzzle where many unrelated bits of information combine to disclose highly important enemy capabilities and intentions. No observation is so small as to be ignored. In turn intelligence channeled to the combat unit may cause the success or failure of the attack.

In a tactical unit the air combat intelligence officer has two primary responsibilities. At a general meeting prior to the take-off, he must brief the airmen concerning the enemy situation as it exists at the moment with special reference to enemy anti-aircraft batteries and anticipated fighter opposition. After the attack he must learn all there is to know from the airmen. This is done at the interrogation immediately after the aeroplane has landed. Out of these two basic responsibilities of the intelligence officer grow others. Among these are: the presentation of war news, training lectures on evasion of capture behind enemy lines, and counseling on such divergent matters as income tax, marriage, divorce and the education of children.

Mentally and physically the flyer is a superior specimen of American manhood. Young, intelligent, healthy, and carefree, his great passion is to fly. Carefully selected the flyer frequently is not aware of the hazards and personal danger involved in combat flying. Usually he is motivated by love of flying, desire for money, promotion and glory, and, of course, by patriotism. He sees in flying a clean way to participate in the dirty business that is war. Yet the most carefully selected, emotionally stable individual may crack up physically and mentally under the stress of continued, great personal danger.

By reason of their dangerous occupation combat flyers live recklessly on the ground and they tend to live together. To discharge their duties two ground officers, the air surgeon and the air intelligence officer, face the absolute necessity of penetrating this reserve to establish and maintain good relations with the airmen. It is not easy. Added to the ordinary hazards of aviation, the combat flyer faces flak, fighters, explosions, and flaming gasoline over a long series of missions. Every flyer knows that each one may be his last. On the other hand so long as we maintain air superiority over the enemy, the ground officer is in no special danger and flyers know this as well. Yet the intelligence officer must gain the flyer's confidence and be accepted by him. In short, airmen must rely upon what the intelligence officer tells them before the attack and he, in turn, must extract vital information when they land, tired, frightened, hungry, often with dead and wounded aboard the

plane, and with the certain knowledge that the next day will duplicate the one just ended.

The interrogation may take place anywhere but the intelligence officer will try to make it as comfortable as possible. Generally, arrangements are made with the Red Cross to supply coffee and doughnuts, for experience has shown that to see an American girl, to hear a few bantering words and to drink hot coffee prepares the way for the interrogation. Where several men fly in one aeroplane the crew will gather about the intelligence officer who plans and guides the interview. Here skill in directing conversation, encouraging enlisted men to speak up where there is disagreement with officers as to what actually was seen, recording information sometimes known in advance to be useless, and discouraging interruptions by other interested persons not parties to the group can be productive of much valuable information. As in social case work the skill of the interviewer determines the success or failure of the interrogation.

Intelligence officers resort to many devices to establish rapport, incidentally, a word which would insult the average flyer if he understood its connotation. Usually the intelligence officer lives in the same quarters, eats the same food and endures the same ground hardships as the flyer. He must participate in their parties which are usually quite rough. After one such party an intelligence officer remarked that he felt entitled to the Purple Heart Medal for wounds to his stomach. He must never condemn yet he must be completely reliable. He may never misstate facts on pain of destroying the peculiar position he has developed so laboriously. He learns of all worthy exploits meriting decorations and does what he can to see that the incident comes to the attention of the proper authority. If he can avoid it he must never sit as a member of a court-martial for that would impair his role as the flyer's friend and confidante. In their effort to identify themselves with the airman and his problems, some intelligence officers voluntarily participate in actual combat missions and some have been lost in this way. In all these ways the intelligence officer artfully strives to establish good relations with the flyers to aid him in attaining his goal, the collection and dissemination of knowledge of the enemy.

The qualifications set by the Air Forces for the selection of combat intelligence officers are not clear. However, it may be observed that maturity, sound judgment, thoughtfulness, and understanding are desirable qualities. Generally, air intelligence officers are older men than the flyers whose top age infrequently exceeds twenty-six years. Many intelligence officers have been lawyers in civil life, others have been salesmen, insurance agents, teachers and bankers. In a sense all are amateur social workers.

Chapter by Chapter

Indianapolis

Chapter Legislative Program

SOCIAL work in Indiana, as in many other states, has been having growing pains. In the 1943 and 1945 sessions of the Indiana General Assembly much attention was given to the public welfare program and related social services. It was feared for a time that the state would go backward and lose the good public welfare program and good social work principles for which social workers and other interested people had worked for many years. The fact that this did not happen is due to public understanding and the tremendous effort put forth by organizations and individuals preceding and during the 1945 legislative session.

DEVELOPMENT OF INDIANA PUBLIC WELFARE

"Home Rule" is an important concept in Indiana. General relief was handled by 1,013 township trustees except during the depression days when the FERA took over, causing considerable resentment and antagonism toward "professional social workers." When the FERA ended, the township trustees again had full responsibility for administering general relief. In the meantime, the Social Security Act was passed by Congress, and the Indiana Welfare Act of 1936 provided for conformance with the Social Security Act. A county welfare department was established in each county to administer old age assistance, blind assistance, aid to dependent children, child welfare services and parole supervision of the State Department of Public Welfare. The county welfare departments were considered a threat by many township trustees. Many other citizens resented the program because of its cost and because of the federal participation, which was looked upon as federal control. The Indiana Welfare Act was recognized nationally as a good law and the State Department made every effort to set up a good

program. The limited number of trained workers in the state was a handicap and there were many other problems in establishing and administering a large public welfare program. No doubt there were points at which the Department failed. In its effort to get the required work done insufficient attention was given to letting the public know what the job was, how it was done, and why it needed to be done. But while the general public may not have been aware of all the implications of the Social Security Act, there were many groups and individuals who were discussing and studying the problems involved. Boards of private agencies were among the first to be interested in, and know, the meaning of what was happening. Groups like the League of Women Voters, well informed on legislative matters, knew from the beginning that the Social Security Act provided more than an emergency program and followed its developments with a full awareness of the meaning. Social workers, of course, were intensely interested in the program, and were constantly trying to interpret it.

THE 1943 GENERAL ASSEMBLY INVESTIGATION

The Indiana General Assembly changed from being predominantly Democratic to predominantly Republican. On February 28, 1943, the General Assembly adopted a resolution establishing a welfare investigation commission, composed of members of the legislature, which was charged with the responsibility of examining and reporting on the administration of public welfare in Indiana. The commission met first on April 20, 1943. For the next eighteen months they held a total of thirty-five meetings in different parts of the state. To these meetings they invited recipients, county directors, members of the State Welfare Board, division heads of the State Department of Public

Each month this department carries a description of an interesting project developed by one of our chapters. This month's contribution comes from the Indianapolis Chapter. The Indianapolis Chapter was founded in 1923 and had a membership of 116 in November 1944. Miss Lucille Batson is chapter chairman.

Welfare, and others who requested a hearing. The commission stated that they "discovered from the very beginning that almost the entire welfare program in the State of Indiana was governed and controlled quite largely by the Social Security Board in Washington, the philosophy of which seemed to be that 'if there is a need—meet it' without regard to much else."¹

The commission gave periodic newspaper releases of their findings and progress. The final report was made on November 15, 1944. This was a thirty-page report stating in the preface that:

"There are two principles which clearly underlie the recommendations in this report:

"1—The first is that the community must be protected and guarded against the creation or the continuance of dependency or need for assistance of any of its citizens beyond the absolute minimum of time and degree of cost.

"2—On the other hand those who, despite every possible effort in their own behalf are compelled to depend upon public help, must receive true protection through adequate, fair, and uniform provision for their essential needs."²

In addition to the principles in the preface there were many things which the committee believed should be corrected. In all there were thirty-one recommendations. Although we as social workers were not in agreement with the commission on all matters that they believed needed correction we disagreed principally on methods of achieving some of these corrections, and on the accuracy of facts brought out by the commission since we believed they had presented chiefly the negative side of the story. The State Board of Public Welfare issued a statement on December 2, 1944, in answer to the official report of the commission. This was a twenty-seven page statement in which they made an introductory statement and then commented on each of the thirty-one recommendations, pointing out inaccuracies and differences of opinion between themselves and the commission.

During the period of the investigation we found that many more groups had been interesting themselves in welfare programs and by the time the two reports had been made public these groups were ready to take a public stand on the issues. Some of these individuals and groups were those who had been interested all along and who were, as a result, ready to be vocal. Others were new supporters who had become interested in response to publicity, or to interpretation from some source, and had then studied the issues.

PREPARATION FOR 1945 LEGISLATURE

Consequently, by the time the legislature opened January 5, 1945, we found the people of Indiana were much better informed on welfare matters than they had been two years before. They were vitally interested in what was happening and were ready to share responsibility. They wanted more information about matters that were brought out in the reports, and in proposed legislation. They were willing to think through ways of meeting the criticism, and to plan for solving the problems. The Indiana League of Women Voters was among the leaders in informing themselves and the public of principles involved and in steering a clear course to achieve sound public welfare administration. Private agency boards and social work groups publicly committed themselves to certain principles. They were willing to fight for what they believed with resolutions, newspaper articles, appearances and statements at legislative sessions and, of course, making all the interpretation they could to individuals. Other groups who expressed themselves in favor of a good program were the Indiana Merit System Association, the Indiana Congress of PTA, the American Legion, the Citizens Committee on Child Welfare Legislation, the A. F. of L. and the CIO.

The citizens of Indiana had a deep conviction that we need good public welfare services. Many private agencies had learned earlier the importance of good administration and the boards of those agencies had employed well qualified executives. These same boards were now insisting on good administration for public welfare as well. We found, too, that when people were aroused to the danger of losing the public welfare program they knew that it was essential and were ready to help in maintaining the program, as well as making any needed changes.

There are two organizations of social workers in Indiana: the AASW and the Social Workers Club. The AASW has a chapter in Indianapolis and one in South Bend. In addition there are about thirty-five individual members throughout the state. The Social Workers Club is an organization of practicing social workers and interested friends. They have a state federation with twelve local clubs. The Social Workers Club and the AASW came out with similar statements in regard to the principles involved. We put ourselves on record in public print as opposed to the detrimental aspects of the commission's report and favoring good public welfare administration. We also appeared at one public hearing, lining up with the numerous other groups, but as an organization we did not appear in the vanguard. We wanted our stand to be on record and to be as effective as possible, but recognized that as an organization we were not well enough known nor did we carry sufficient weight with the public in general to be effective in a position of leadership.

¹ Official Report of the Indiana Welfare Investigation Commission. 11-15-44.

² Ibid., p. 4.

In addition to group action, individual members were effective in working with various organizations and individuals by supplying them with information possessed by the professional social worker and which these lay groups needed in order to present valid arguments and to develop a point of view.

LEGISLATIVE INFORMATION SERVICE

AASW participated with four other social groups in the continuation of a welfare legislative information service, first established during the 1943 legislative session. The participating organizations besides AASW were the County Welfare Directors Association, State Conference on Social Work, and Federation of Social Workers Clubs. This service published a weekly bulletin giving information on health and welfare bills introduced into the General Assembly, a digest of their meaning, current revisions and progress in the legislature. This bulletin was financed by contributions from the groups participating and from individual subscriptions. An editor was employed who obtained the information, interpreted the bills, and wrote the bulletin. An editing committee made up of representatives from different fields of social work met weekly to go over the material before it was mimeographed. Except for the salary of the editor and one part-time clerical person, and the cost of supplies, the work was done by volunteer help and equipment lent by the participating organizations. The bulletin was sent to a mailing list of 1,830 throughout the state.

During the sixty-one day session of our legislature, from January 5, 1945 to March 6, 1945, there were more than 100 health and welfare bills out of a total of 750 bills introduced. Sixty-four were passed and sent to the Governor. It seems improbable that never, in the history of the Indiana Legislature, has there been so much interest directed toward a welfare program. It has been a stimulating experience for all of us and we have learned a great deal from it.

Bills introduced pertaining to welfare affected not only the public welfare agencies, but other programs such as the Juvenile Court, the merit system, the parole system, and care for mentally ill persons. There were bills involving children born out of wedlock, placement of children for adoption, social protection, and others. The public welfare laws related to organization and functions of both the county and state boards, and the administration of the various assistance programs. A great deal of interpretation was needed on all these bills.

PUBLIC WELFARE ADMINISTRATION BILLS

There were two public hearings at which many interested groups appeared. The first hearing was on three related bills described by the Welfare Legislative Information Service as "welfare department 'ripper bills'." House Bill 20 provided

for the abolishing of all present county welfare boards as of July 1, 1945 and provided a new method of appointing five member boards to replace them, the appointive power being vested in four different officials in each county. House Bill 22 provided for abolishing the present five member, part-time policy-making board of the State Department of Public Welfare and provided for a new full-time, three member, paid board that would make all policies of the department and administer them. House Bill 33 provided for twelve major changes in the operating functions of the State Department of Public Welfare. These bills were introduced in the House within the first week of the session and the public hearing was before the House Social Security Committee on January 16. Groups appearing in opposition to these bills contended that they were administratively unsound, would weaken the merit system, and would disrupt the Department of Public Welfare by divided executive control. Those appearing in opposition to the bills were the Indiana League of Women Voters, Indiana Merit System Association, Indianapolis Council of Social Agencies, Indiana Congress of Parents and Teachers, American Legion, Indiana Association of County Welfare Directors, CIO, AFL, Indiana State Conference on Social Work, and AASW. Through interpretation in this hearing and elsewhere it was possible to get further consideration of these bills so that they were passed in the final week of the session with major modifications. All during that time work was being done on the bills.

In final form House Bill 20 was amended so that appointive power for county boards was vested in one county official, the circuit judge, instead of four, thus placing responsibility for the caliber of the board in one person. There were still some restrictions on the composition of the board but they did not present serious difficulties. Also the date of appointing the new boards was moved up to June 1 to take care of budget problems. House Bill 22 was amended so as to retain a five member policy making State Welfare board. House Bill 33 went through a great deal of debate and several amendments, and in the end did not present any insurmountable difficulties.

CHILD WELFARE LEGISLATION

The second public hearing was also before the House Social Security Committee in the presence of members of both the House and Senate on February 6. This was on House Bill 235 which was a bill requiring Juvenile Courts or courts of juvenile jurisdiction to approve any plans made by child caring agencies, both public and private, for children born out of wedlock; and required that the agencies in charge of placement and care of children make detailed reports of all cases to the Juvenile Court. This bill was denounced by opponents as detrimental to the welfare of children and parents who need help from social agencies

and do not need the services of the court. Those represented at this hearing were the Indiana Citizens Committee on Child Welfare Legislation, Fort Wayne Citizens Committee, Indianapolis Community Fund, Indianapolis Children's Bureau, Indianapolis Family Welfare Society, Suemma Coleman Home, Catholic Charities Bureau of Indianapolis and Fort Wayne, and Family and Children's Service of Evansville. This hearing provided opportunity for interpretation of sound child welfare practices and the following day the bill was killed in committee. There were many other bills on which we were active but these were the only public hearings in which we participated.

ATTITUDE OF THE PRESS AND PUBLIC

We could not have had as widespread understanding of the welfare legislation, and the advantages and disadvantages of it, if it had not been for excellent newspaper coverage. The press throughout the state was friendly and helpful, but we were most aware of the attitudes of the three daily papers in Indianapolis. They gave very good coverage in regular news articles to all welfare bills introduced, and were well informed on the principles involved. They were especially helpful in their editorial columns where they frequently brought to the attention of the public the bills that needed especially careful and thoughtful attention.

Most of the legislators were cooperative, and interested in knowing all sides of the issues involved. They wanted to know what people interested in social work thought and why. They were willing to listen and to give everyone an opportunity to explain his point of view. They were as concerned about the welfare program as we were. Very naturally we had different approaches to the problems, but they respected the opinions of social workers and other well informed people. Professional social workers, either as individuals or groups, had very little direct contact with legislators. They were usually approached by well informed and experienced lay people who knew more about such things than we.

We learned about legislative procedures; how a bill is introduced, the number of times a bill must be read before it is ready for final passage, the ways in which a bill can be changed and should be changed along the way, the tremendous amount of thought and work that are put into a bill by the committee to which it is assigned. We learned how to get in touch with the people who could be helpful in making needed changes, and we found at what points it was possible to make changes. Few bills are passed in the same form in which they are introduced to the legislature, and certainly through working on the many health and welfare bills we learned how the democratic process really works.

Although there were times when we wondered

if we would lose all that was good in the way of sound welfare administration and practice, we nevertheless found ourselves stimulated and challenged by what was happening. We found that the legislators and ourselves were in much closer agreement than we had originally supposed and that we were both relatively well satisfied with the results of the legislative session. We were gratified by the long, hard work that many lay groups were willing to spend in order to learn all they needed to know to back or oppose proposed legislation. We found them as sincerely interested in and concerned about the people we deal with as we are and that they care a great deal about having a good welfare program. They are staunch supporters and loyal friends and we can count on them in the long, hard pull ahead to help us in achieving some of the standards in which we all believe. The cooperation between lay groups and professional groups was impressive. For the first time to any great extent we worked together toward a common goal.

In addition to the cooperation between lay and professional groups we found a new cooperation within our own group. We found that in our common objective we could work together as one group, and not as many separate groups aware of agency or specialized field affiliations. We found that in fundamental principles we are very much together and can give leadership, therefore, to community thinking. The leadership we gave was in making available to other groups information we had, and knowledge we had gained from experience. We saw ourselves as being a part of the whole big job of community planning for social work. Others had their part, too, and only as we are able to work together can we make ourselves felt as a force in the community. One of the most important end results of this experience is that we are now challenged more than ever to do a good job and to maintain the community gains we have made. We have a long way to go and we know it. We do not have enough qualified people to do the job as it should be done, but we are working together as never before. We have many loyal supporters willing to do everything in their power to help us do a good job. We have an enlightened public opinion, more people aware of our needs than ever before. We are enthusiastic about the job ahead of us and willing to do everything in our power to warrant the confidence placed in us. We look with interest toward the future development of private and public welfare services in Indiana.

This material was compiled by Marian Emery as chairman of the Indianapolis Chapter of AASW last year. The following persons contributed or advised in preparing the report: Lucille Batson, Mrs. Austin Clifford, Mrs. Caroline Goodwin, Louise Griffin, Ruby Little, Robert Nelson, Bernice Orchard.

Guide for Evaluation of Military Experience as Qualifying for Civilian Employment in Social Work*

THE Wartime Committee on Personnel submits this statement developed by its Subcommittee on Civil Service to assist employing agencies in determining the qualifications of veterans for civilian social work employment. The statement is directed toward employing agencies but may be of some value to organizations offering advice to veterans.

The committee recognizes the responsibility of the social work profession to veterans and the difficulties faced by social agencies in securing adequate information on which to arrive at equitable decisions in offering employment to them. Professional groups and agencies have tried to keep in touch with social workers who have entered military service and look forward to their return to the field of social work.

Thus, the basic assumptions on which this statement rests are that qualified veterans should be given every opportunity to demonstrate their ability to perform social work functions and that decisions on their relative competence should be determined as objectively as possible.

Valuable information has been secured from representatives of the Offices of the Adjutant General and of the Surgeon General in the War Department and from those of the United States Civil Service Commission, as well as from descriptions of duties submitted by social workers in the armed forces.

Use of the best techniques for measuring education and experience is important to adequate personnel selection in any period and is especially essential when dislocations of large numbers of workers occur. The greater the variations, the more complex the problems, and the greater the necessity for adequate methods of measurement. Because of the involved nature of the process of evaluation, the present treatment of the subject may appear over-technical to some readers and over-simplified to others. No attempt has been

made to resolve this dilemma. Rather, an attempt has been made to consider issues, suggest general methods, and report significant information. A brief bibliography has been appended for those who wish to appraise afresh the problems in rating education and experience.

Primary consideration has been given to military work experience as distinguished from military education.

Accordingly, this discussion does not take into account details in the evaluation of military education such as has been secured through special courses or through cultural achievements derived from contact with different peoples or through travel. Apparently, no technical courses in the field of social work have been prepared by the United States Armed Forces Institute for members of the armed forces. However, tests of general achievement have been developed by the United States Armed Forces Institute. These tests were constructed primarily in order that the educational level of servicemen may be appraised, especially of those whose formal education has been interrupted and who wish to complete their education after leaving the service. The general tests may prove of value in personnel selection for employment for certain jobs and may be purchased.

Basically, the problem of evaluating military work experience is to assign suitable values to specific military work experiences through the development and application of a rating scale. The primary element which should be given consideration is the degree of relationship between the experience and the position for which application is being made. The extent and kinds of responsibilities involved and of job operations performed are significant factors.

Judging the relative values of even similar types of experience is at best a difficult process. Two people may have what appears to be the same assignment, in the same social agency, under the same administration and supervision, and yet receive different values from the experience. Nevertheless, by developing a schedule to be used as a standard against which to measure the particular experience of an individual, the process is made more objective than otherwise. Rating experience

* In view of the urgent need for material of this kind, concurrence of members of the Wartime Committee on Personnel on this statement was obtained through correspondence. With the exception of the American Association of Psychiatric Social Workers all members of the committee have approved the publication of this statement in its present form.

in this fashion is, of course, only one of the ways of appraising the values of experience. In personnel selection each of the other parts of the selection process, which commonly includes an evaluation of education, written and oral examinations, an application interview, and the probationary period, in a sense appraises the values secured from experience in addition to other factors.

SIGNIFICANT FACTORS IN MILITARY EXPERIENCE

A majority of social workers are in the Army. Although the use of social workers in other branches of the armed forces has varied somewhat from that of the Army, the principles suggested below are generally applicable, although the specific illustrations which follow are based, by and large, on the situation within the Army.

Evaluation of military experience is complicated by several factors:

1. The personal records of the armed forces and the references of supervising officials are not generally available for review by the employer. He must, therefore, usually rely upon the brief official record of military assignments contained in War Department Form 100 and the applicant's description of his duties and responsibilities.
2. Social work duties were not identified in the classification plan of the Army until October 1943. Domestic assignment of available qualified personnel was not obligatory until July 1944. Many social workers were commissioned (although not as social workers), were overseas, were assigned to work from which they could not be shifted, or were otherwise unavailable for reassignment by the summer of 1944.
3. In most instances, the individual had no choice of assignment. Army needs, rather than the soldier's professional equipment or preferences, determined his assignments.
4. Military psychiatric social work is practiced almost entirely at the non-commissioned level. In general, quotas of non-commissioned ratings have not been designated for psychiatric social work personnel. Enlisted men have, therefore, continued as non-commissioned personnel although they carried supervisory or administrative responsibility for the military psychiatric social work program. One result is that the responsibilities assigned to the individual, the quality of his performance, and his demonstrated pro-

fessional leadership in the Army may not be apparent on the basis of his rating as an enlisted man nor on the basis of the length of time he has held a particular rating.

5. Many social workers may have found the experience of being in the armed forces valuable beyond the specific values inherent in their job assignments; for others these experiences will not have been developmental.
6. Serious difficulty will be experienced in comparing military and civilian experience. Most of the persons called upon to judge the relative value of a military experience as compared with a civilian experience will have no first-hand knowledge of the military experience.

GUIDES FOR EVALUATION

The committee believes that veterans should be given all reasonable credit for military experience. The committee further assumes that it is reasonable to give a certain amount of veterans' preference in initial selection in the form of point credits to be added to the total score as a relatively fair way of equalizing the opportunities of men in the armed forces and of individuals in civilian occupations. Veterans' preference plans in civil service jurisdictions and elsewhere are directed to this end. The Wartime Committee on Personnel has endorsed the recommendations of the report entitled "The Employment of Veterans in the Public Service in the United States" prepared by the Civil Service Assembly of the United States and Canada, August 1944. The guides mentioned below presuppose that if preference is to be given it take some such form and that, accordingly with the exception noted below under 4, no additional preference need be given in evaluating actual military work experience.

1. Primary factors to consider in evaluating military experience are: (1) relatedness of the military assignment to the position for which application is being made; (2) length of time in each assignment; (3) supervisory, administrative, or consultative responsibility which may occur at any rank; (4) kinds of operations performed; (5) degree and kind of responsibility; and (6) special knowledge required on the military assignment.
2. Experience which appears similar as to degree and kind of responsibility varies considerably in quality. Because of the difficulty of rating these variations objectively, it is considered inadvisable to attempt extreme refinement in the rating process.

3. Normally, the establishment of three levels of values for experience, based on the degree to which it is related to or prepares for the position for which application is made, gives opportunity for adequate discrimination. For example, in developing a schedule for evaluating military work experience alone without reference to previous education, it seems reasonable that the highest credit should be given for (1) actual social work experience, less to (2) related experience, and no value to (3) non-related experience.
4. The application of such a schedule is, however, complicated by the fact that previous education and experience may have had an appreciable effect upon the value of any single later experience. For example, skills which a person has acquired thoroughly he tends to continue to use if he has any opportunity to do so. Social workers who had completed their professional training and had had considerable experience prior to induction would be more apt to utilize skills already acquired than persons with little professional training and/or scant experience, regardless of military assignment. It is on this basis that military experience is frequently considered an extension of previous civilian experience by civil service jurisdictions.
5. Conversely, a person with little social work training or experience who serves for several years in assignments unrelated to social work, particularly when cut off from professional contacts, would tend to lose his social work skills. Consequently in this instance, it would seem fair to assign little or no value to the military experience.
6. Numbers of other combinations of education and experience may be presented by the veteran applying for a job. The schedule developed for evaluating military work experience must, therefore, be related to schedules for evaluating education and previous civilian experience.
7. Following are examples of military assignments and the degree to which they are related to social work skills. Frequent changes in the War Department's classification plan make it undesirable to attempt a full listing of specific classifications which might be placed in each group.

(1) *The Only Assignment Designated by the Army as Social Work:*

Psychiatric Social Work

The Army psychiatric social work personnel as classified on the basis of civilian experience consists of graduates of recognized schools of social work or

individuals with at least two years' experience in a public or private social or health agency. In addition, an appreciable group of military personnel have been classified and assigned on the basis of military experience only, which must have included a few months of successful work in military psychiatric social work duties.

Domestic assignments have been in neuropsychiatric hospitals; neuropsychiatric sections of all types of hospitals; out-patient neuropsychiatric clinics of hospitals; rehabilitation centers and disciplinary barracks, induction centers, redistribution centers, and separation centers; consultation centers (or mental hygiene units); personnel consultation services; and with division psychiatrists. Overseas assignments have occurred with division psychiatrists and in the neuropsychiatric services of the various types of hospitals.

Duties, as directly delegated by the psychiatrist, vary as the purpose of the unit and the skill of the workers vary. Included are intake, social history, follow-up, collateral and social treatment interviews; interpretation of the clinical program through individual contact and group mental hygiene programs; referrals, and supervised social group therapy. In addition, administrative duties are frequently delegated in relation to the reception, care, diagnosis, and disposition of unadjusted soldiers or mentally and emotionally sick soldiers.

Psychiatric supervision has occurred in all units. Psychiatric social work supervision and inservice training programs have been provided increasingly, especially in the larger units.

Army psychiatric social work has been performed both by enlisted men and women. There have been instances, however, in which officers, qualified social workers, have carried major responsibility for a unit's psychiatric social work program under psychiatric supervision. War Department Technical Bulletin TB Med. #154, *Psychiatric Social Work*, issued June 1945, is printed below. This document will be useful for the generalized picture but cannot replace the individual's own description of his Army social work responsibilities and assignments.

(2) *Military Assignments Permitting Use of Social Work Skills*

Many officer and enlisted assignments require responsibility for direct

individual and group services to military personnel. Among such services are classification; assignment; and counseling or activities in relation to educational, vocational, recreational, and personal interests. Other services are the large scale welfare programs for Army or Navy personnel or for civilian personnel in military areas. Social workers assigned to duties in these and related areas find self-initiated opportunity for the partial use of their specialized skills.

(3) *Military Assignments Unrelated to Social Work*

Assignment to duties in a combatant unit where the required specialized skill is limited to the purpose of combat or assignment in one of the service elements where the duties specifically relate to functions of material or objective content are considered as not drawing upon social work experience or qualifications.

8. Evaluation may be made on the basis of:

- (1) War Department Form 100, which will list and describe the individual's civilian experience prior to induction, the assignments and usual duties in each assignment, his military rank, and recommendations for civilian occupations for which he is considered qualified;

- (2) The description given by the individual of the work he performed in the various assignments;
- (3) The applicant's statement as to the way in which he believes his military experience qualifies him for the position for which he is applying.

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Introductory Note About TB Med. 154, June 1945

Technical Medical Bulletins, documents distributed to medical officers and other relevant personnel from the Office of the Surgeon General, U. S. Army, carry current descriptions of the plans and programs within the province of that Office. The following document is the first official statement of a professional nature issued by the Army which applies solely to the standards of Army psychiatric social work practice and personnel. It is printed with permission, and with

the hope that it may serve as background for individual social workers, and for agencies, to understand further the recent and present military experience of an appreciable number of men and women in our field.

A brief bibliography on the Development and Practice of Army Psychiatric Social Work may be obtained on request through the War Office of Psychiatric Social Work, 1711 Fitzwater Street, Philadelphia 46, Pa. (until Nov. 30, 1945).

TB Med. 154—War Department Technical Bulletin

Psychiatric Social Work

1. PURPOSE. This Technical Bulletin is intended to serve as—

a. A guide for military psychiatric social workers and psychiatric assistants, outlining their administrative relationships and professional duties.

b. An outline for orientation and special reference use by psychiatrists, classification officers, and other relevant military personnel of the qualifications of various types of personnel and their practice in this field.

2. TYPES AND CLASSIFICATION OF PSYCHIATRIC SOCIAL WORKERS.

a. SSN 263, Social Worker, and MOS 263, Psychiatric Social Worker, designate enlisted personnel, both male and female, who have civilian social work background as assistants qualified to aid neuropsychiatrists in hospitals, redistribution centers, separation centers, mental hygiene consultation services, disciplinary barracks, induction stations, and rehabilitation centers. SSN 263 is the designation used by the Army Ground Forces and the Army Service Forces.

b. The SSN qualifications require the individual to have a graduate degree in social work from a recognized school of social work, or at least 2 years supervised experience in social work activities in a private or public agency.

c. Individuals with minimum qualifications for SSN 263 show a wide variation in these qualifications in their professional education as well as civilian experience. Their competency will therefore vary widely, depending on this training and experience. Many military psychiatric social workers had had no experience in psychiatric organizations prior to their Army experience. Among social workers will be found not only psychiatric social case workers and social case workers, but also personnel especially trained in social group work, social administration, community organization, and social research. Standards for the selection and assignment of military psychiatric social workers must be based on Army needs and policies; and, of necessity, these will require readjustments of civilian professional standards. A continuous on-the-job training program of lectures and seminars, particularly to orient the new worker, will contribute greatly to efficient service.

3. DUTIES OF MILITARY PSYCHIATRIC SOCIAL WORKER.

a. These duties cover specific social services, which should be delegated by the neuropsychia-

trist. They may be separated into job assignments in relation to intake, orientation, referral, and follow-up of patients, as well as liaison with other services in the unit or of the installation. Under authority delegated to him by the neuropsychiatrist, the military psychiatric social worker:

- (1) Obtains information from Army units; presents history material or interview content for the neuropsychiatrist, so that diagnoses, treatment, and disposition are facilitated.
- (2) Will, under the direction of the psychiatrist, interpret the findings and/or the program of the psychiatric unit to agencies or persons concerned, such as other medical personnel, unit commanders.
- (3) Will have the responsibility to explore and initiate effective use of opportunities and facilities within the Army structure, to aid in the solution of the patient's problem.
- (4) Aids in the reorientation of the soldier to his problem, making such recommendations for, and reports of, treatment and disposition to the psychiatrist as may be pertinent and possible.
- (5) Will assist, when directed, with group therapy, preventive psychiatry, or other programs for which the neuropsychiatrist is responsible.
- (6) Will aid in administrative procedures, including the preparation of necessary records, and reports, schedules, and other related activities.

b. In assigning specific duties, the psychiatrist, or the psychiatric social case work supervisor, if delegated, will assume that the greater the total professional education and experience of the psychiatric social worker, including experience in Army social work, the greater the responsibility which safely can be given for the above. In addition to case work and therapeutic skill, full utilization will be made of special experience or ability in all personnel, such as social group work, organization, and administration.

4. PSYCHIATRIC ASSISTANT, WAC. Serves in neuropsychiatric units, carrying duties which require less professional experience and skill than those duties assigned to qualified psychiatric social work personnel.

a. Civilian qualifications include: Completion of a 1-year course in a recognized school of social work; or a college degree, or 2 years of college,

plus 1 year full-time experience in supervised case work.

b. Duties of psychiatric assistant: Psychiatric assistants and other personnel not fulfilling the professional requirements of SSN 263, will be assigned primarily to—

- (1) The selection and preparation of objective data related to patients, such as abstracting accessible medical and nonmedical records, maintaining records of psychiatric service, etc.
- (2) Delegated aspects of the administrative responsibilities of the psychiatrist, such as initiation of CDD forms, reports to Boards of Officers under AR 615-368, AR 615-369, etc.

c. Individual differences in personality and native capacity will be such that under heavy pressure of need, psychiatric assistants may be assigned to the simpler duties requiring direct contact with patients. No assignment to such duties will be made without providing adequate safeguard to patients through close supervision.

5. STANDARDS OF PRACTICE OF SOCIAL WORK.

a. The military psychiatric social worker is primarily a soldier, secondarily a social worker. It is to be expected that military responsibilities may take precedent, at times, over professional work. When possible, the soldier will have completed basic training prior to assignment as a psychiatric social worker.

b. The military social worker must adapt his previous civilian procedures, goals, and techniques to military neuropsychiatric purposes. This implies the recognition that the group is the primary unit and the individual secondary to the group. Effective use of his social work experience will depend largely on his orientation to and familiarity with the Army and the particular unit in which he functions. Specifically, he must recognize the limitations of time to be invested in any one patient; that process reports of an interview are rarely justified; that the importance of a patient's particular complaint must be judged in light of the Army program and plan for that soldier; that the recommendations and management of one individual have their influence and repercussions on the group to which he belongs and must be weighed from this point of view.

c. The attitudes of military social workers, as manifested towards the patient, may markedly benefit or harm him, no matter how slight the contact. Under all circumstances, the worker must remain objective yet sympathetic. All personnel working with psychiatric patients must refrain from expressing or implying censorious criticism or moralistic judgments except where

sound psychiatric practice justifies its use. Special effort must be made never to make fun of the patient's ideas or behavior. Every worker must restrict his interest in the patient's history and personality to data which is pertinent to the mission of the unit. All information gained from patients is strictly confidential, and is not to be discussed except in professional situations.

d. In all liaison contacts, the social worker's written or verbal communications should avoid the use of psychiatric terminology and utilize simple English, intelligible to the layman.

e. It is to be expected that the military situation may make demands of the psychiatric social worker which are radically different than in civilian life. In making his own readjustment to the military situation, he should recognize that the opportunities for service in the Army are unlimited and that his personal opportunities for learning are limited only by his own attitudes and industry.

f. It must be borne in mind that the making of definitive diagnoses is the sole prerogative of medical officers.

g. The line of responsibility of the military psychiatric social worker and of the WAC psychiatric assistant is directly to the neuropsychiatrist in charge. The delegated and specific responsibility of the military psychiatric social worker and the psychiatric assistant will be determined by the military neuropsychiatrist and will vary with mission of the installation.

6. ADMINISTRATION AND SUPERVISION OF PSYCHIATRIC SOCIAL WORK PROGRAM.

a. The chief psychiatric social worker, appointed by the psychiatrist on the basis of experience and leadership, carries delegated responsibility from the psychiatrist for the development of a military social service program based on a common interpretation and application in practice of administrative policies and procedures.

b. He is responsible for the quality of the performance of the psychiatric social work members.

c. In the fulfillment of these responsibilities, he—

- (1) Establishes, with the psychiatrist, the social work policies of the organization.
- (2) He assists the psychiatrist in relating the military social work activities with the activities of the clinical psychologist, the Red Cross, and with all related services.
- (3) He supervises, through reading of records and conferences, the social case work activities of the 263's, or delegates supervision to qualified staff members.
- (4) He plans, with the psychiatrist, on-the-job training for psychiatric social workers and for psychiatric assistants, and takes part in the appropriate instruction.

7. RELATIONSHIP BETWEEN RED CROSS AND MILITARY PSYCHIATRIC SOCIAL WORKERS.

a. Personal, family, and other case work services to patients, as delegated to the American Red Cross, in accordance with AR 850-75, 30 June 1943, continue in neuropsychiatric units under the authorization of that regulation and in line with subsequent administrative policies.

b. In addition to his contribution to some of the strictly military social needs of a soldier, as outlined in paragraph 3a (2) (3) (4) and (5) of this bulletin, the Red Cross psychiatric social worker is in a strategically advantageous position to deal with the social needs of the soldier which are of a civilian character.

c. Certain social services are essentially military in character, such as securing reports of the observations of patient behavior, the preparation of certain records, and direct assistance with some types of patient difficulties. In such instances, the fact that the patient recognizes his military social worker as representing the delegated authority of the psychiatrist will prove an asset in psychiatric social case work treatment.

d. Army psychiatric social workers will not undertake services which, by regulation and practice, have become the established responsibility of the Red Cross, such as initiating contact in behalf of the patients with civilian individuals or organizations.

e. In accordance with established policy, the Red Cross worker will not undertake supervision of the military workers; and conversely the military social worker will not supervise the work of the Red Cross. The Red Cross worker will participate in all appropriate neuropsychiatric staff meetings, lectures, seminars, etc.

f. Due to limited number of skilled social work personnel, available through either source, and due to the tremendous social and personal needs of patients, it is essential that duplication and confusion be avoided through planned, but flexible, allocation of duties.

8. REFERENCES TO UTILIZATION OF PSYCHIATRIC SOCIAL WORKERS.

a. War Department Technical Bulletins:
TB MED 103, Group Psychotherapy, 10 October 1944.

TB MED 84, Treatment Program for Psychiatric Patients in Station and General Hospitals, 10 August 1944.
[AG 300.5 (23 May 45)]

By order of the Secretary of War:
TB MED 80, Reconditioning Program for Neuropsychiatric Patients, 3 August 1944.

b. War Department Circular:
Section V, War Department Circular No. 295, 1944, Psychiatric Social Worker.
War Department Memo No. 615-44, recurrent, Critically Needed Specialists.

c. ASF Circulars and Manual:
ASF Circular No. 419, 1944, Convalescent Hospitals (Revised Program).
ASF Circular No. 242, 1944, Army Ground and Service Forces Redistribution Stations (in particular: Appendix 4, section II, Medical Examination).
ASF Manual M 4 (30 April 1945), chapter 10, section VI, Consultation Service and Personal Adjustment.

d. Classification: TM 12-427, 12 July 1944.

e. A growing body of professional literature is to be found in psychiatric and social work journals, contributed to by medical officers, military psychiatric social workers, and civilians.

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